

Supplemental Patent Application Data Sheet**RECEIVED
CENTRAL FAX CENTER
DEC 27 2006****Application Information**

Application number:: 10/567,737

I.A. Filing date:: August 12, 2004

Application Type:: Regular

Subject Matter:: Utility

Suggested
Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Computer Readable
Form (CRF)?:: No

Title:: **Methods for Preventing Neurological Events**

Attorney Docket Number:: 192039-375930 (T01108-0060-US)

Request for Early
Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 3

Total Drawing Sheets:: 11

Small Entity?:: Yes

Latin Name::

Variety denomination
name::

Petition included?:: No

Secrecy Order in
Parent Appln.?:: No

RECEIVED
CENTRAL FAX CENTER
DEC 27 2006

Applicant Information

Inventor Authority Type:: Inventor
Primary Citizenship
Country:: Canada
Status:: Full Capacity
Given Name:: Anthony
Middle Name:: Kam Chuen
Family Name:: CHAN
City of Residence:: Ancaster
State or Prov. of
Residence:: Ontario
Country of Residence:: Canada
Street of mailing address:: 146 Springfield Boulevard
City of mailing address:: Ancaster
State or Province of
mailing address:: Ontario
Country of mailing address:: Canada
Postal or Zip Code of
mailing address:: L9K 1H8

Inventor Authority Type:: Inventor
Primary Citizenship
Country:: Canada
Status:: Full Capacity
Given Name:: Petr
Family Name:: KLEMENT
City of Residence:: Hamilton

State or Prov. of
Residence:: Ontario

Country of Residence:: Canada

Street of mailing address:: 25-825 Concession Street

City of mailing address:: Hamilton

State or Province of
mailing address:: Ontario

Country of mailing address:: Canada

Postal or Zip Code of
mailing address:: L8V 1C4

Inventor Authority Type:: Inventor

Primary Citizenship
Country:: Canada

Status:: Full Capacity

Given Name:: Paul

Family Name:: TRESSEL

City of Residence:: Hamilton

State or Prov. of
Residence:: Ontario

Country of Residence:: Canada

Street of mailing address:: 115 Dromore Crescent

City of mailing address:: Hamilton

State or Province of
mailing address:: Ontario

Country of mailing address:: Canada

Postal or Zip Code of
mailing address:: L8S 4B1

Inventor Authority Type:: Inventor
Primary Citizenship
Country:: Canada
Status:: Full Capacity
Given Name:: Leslic
Middle Name:: Roy
Family Name:: BERRY
City of Residence:: Burlington
State or Prov. of
Residence:: Ontario
Country of Residence:: Canada
Street of mailing address:: 1118 Augustus Drive
City of mailing address:: Burlington
State or Province of
mailing address:: Ontario
Country of mailing address:: Canada
Postal or Zip Code of
mailing address:: L7S 2L2

Inventor Authority Type:: Inventor
Primary Citizenship
Country:: Canada
Status:: Full Capacity
Given Name:: Jeffrey
Middle Name:: I.
Family Name:: WEITZ
City of Residence:: Ancaster

State or Prov. of
Residence:: Ontario

Country of Residence:: Canada

Street of mailing address:: 54 Carluke Road East

City of mailing address:: Ancaster

State or Province of
mailing address:: Ontario

Country of mailing address:: Canada

Postal or Zip Code of
mailing address:: L9G 3L1

Inventor Authority Type:: Inventor

Primary Citizenship
Country:: Canada

Status:: Full Capacity

Given Name:: Jack

Family Name:: HIRSH

City of Residence:: Burlington

State or Prov. of
Residence:: Ontario

Country of Residence:: Canada

Street of mailing address:: 442 Maple Avenue

City of mailing address:: Burlington

State or Province of
mailing address:: Ontario

Country of mailing address:: Canada

Postal or Zip Code of
mailing address:: L7S 2L7

RECEIVED
CENTRAL FAX CENTER

DEC 27 2006

Correspondence Information

Correspondence Customer
Number:: 027155

Phone Number:: 416-362-1812

Fax Number:: 416-868-0673

E-Mail Address:: anador@mccarthy.ca

Representation Information

Representative
Customer Number:: 027155

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/CA2004/001497	August 12, 2004
PCT/CA2004/001497	Non Prov. of Prov.	60/494,120	August 12, 2003